

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33984

FILED
Mar 21, 2009
Secretary of State

Entity Name: INDIAN BAY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

INDIAN BAY DRIVE
FREEPORT, FL 32439

New Principal Place of Business:

1 INDIAN BAY DRIVE
FREEPORT, FL 32439

Current Mailing Address:

INDIAN BAY DRIVE
FREEPORT, FL 32439

New Mailing Address:

1 INDIAN BAY DRIVE
FREEPORT, FL 32439

FEI Number: 59-2969696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHN, VICTOR
374 INDIAN BAY DR
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

RAGLE, ROSEMARY
380 INDIAN BAY DR
FREEPORT, FL 32439 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROSEMARY RAGLE

03/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRAHN, VICTOR
Address: 379 INDIAN BAY DR
City-St-Zip: FREEPORT, FL 32439

Title: D () Delete
Name: FIELDS, DIANNE
Address: 360 INDIAN BAY DR
City-St-Zip: FREEPORT, FL 32439

Title: D () Delete
Name: BREWER, MARY
Address: 359 INDIAN BAY DR.
City-St-Zip: FREEPORT, FL 32439

Title: S () Delete
Name: GRAHN, JUDY
Address: 379 INDIAN BAY DR
City-St-Zip: FREEPORT, FL 32439

Title: T () Delete
Name: COOKEY, CHARLES D
Address: 471 INDIAN BAY DR
City-St-Zip: FREEPORT, FL 32439

Title: D () Delete
Name: GRAHN, VICTOR
Address: 379 INDIAN BAY DR
City-St-Zip: FREEPORT, FL 32439

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COOKE, TARRAH
Address: 127 INDIAN BAY DR
City-St-Zip: FREEPORT, FL 32439

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D/T (X) Change () Addition
Name: BREWER, MARY
Address: 359 INDIAN BAY DR.
City-St-Zip: FREEPORT, FL 32439

Title: S (X) Change () Addition
Name: GRAHN, JUDY
Address: 379 INDIAN BAY DR.
City-St-Zip: FREEPORT, FL 32439

Title: D (X) Change () Addition
Name: JOSE, SALDANA
Address: 36 BAY COVE
City-St-Zip: FREEPORT, FL 32439

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSEMARY RAGLE

P

03/21/2009

Electronic Signature of Signing Officer or Director

Date